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WEB ARTICLES

W3-2

Quality and Safety of Hospital Care for Children from Spanish-Speaking Families with Limited English Proficiency

Christina Bethell, Lisa Simpson, Debra Read, Elisa J. Sobo, Judi Vitucci, Brooke Latzke, Susan Hedges, Paul S. Kurtin

The issue of improvement in communication among patients and healthcare professionals is a priority on today's national healthcare quality agenda. This article discusses a study aimed at reducing communication-related, negative hospital quality and safety events for children from Spanish-speaking, limited English proficient (LEP) families. Twelve focus groups were conducted with parents, providers, and hospital quality improvement (QI) professionals. A survey for Spanish-speaking LEP parents was developed and evaluated for its perceived value for assessing communication-related aspects of quality and safety of hospital care. Parents, providers, hospital staff, and QI professionals perceived that language and cultural differences have a pervasive and often negative effect on the quality and safety of hospital care for children that is only partly related to the availability of language interpretation services. Both common and divergent perspectives regarding improvement priorities and the value placed on the survey topics were found in the responses of parents, healthcare providers, and QI professionals. Findings revealed substantial barriers to measuring or addressing problems with communication. Additional challenges include evaluating how these problems affect quality and safety of care and understanding how differences in language and culture have a unique impact on communication, quality, and safety.

W3-17

q&a: Cheryl Knapp and Jane Janssen on the Baldrige Process at Bronson Methodist Hospital

Joann Genovich-Richards

The Malcolm Baldrige National Quality Award is the nation's highest presidential honor for quality and organizational performance excellence, and in 2005 Bronson Methodist Hospital (BMH), Kalamazoo, MI, was the only healthcare recipient of the award. Bronson Healthcare Group's Cheryl Knapp and Jane Janssen spoke to JHQ about BMH's review process for the Baldrige award.

W3-19 Conference Brief Report: Update on the National Health Policy Conference

Jacqueline F. Byers

The National Health Policy Conference, sponsored by AcademyHealth and Health Affairs, was held February 6–7, 2006 in Washington, DC. Prominent national leaders from public and private sectors came together to discuss and debate current health policy issues. The review briefly highlights implications for healthcare quality professionals and refers readers to Web resources including Web casts of the presentations, Microsoft PowerPoint presentations and handouts from the speakers, and a conference summary.

DEPARTMENTS

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The U.S. Healthcare Certificate of Need Sourcebook

Robert James Cimasi Beard Books, www.beardbooks.com, 2005, \$199.00, 512 pages, ISBN 1-58798-275-7

Audience: administrators, businesspeople, lawyers, legislators, physicians, policy makers, regulators

Key Words: government regulations, public policy, resource utilization

This book is a great resource for certificate-ofneed information; it contains resource-related materials and addresses concerns related to certificate of need. An introductory section discusses some of the historically pivotal and troublesome aspects of statutory and regulatory-laden certificate-of-need schemes. The reference materials should be helpful to those seeking to disentangle the knotty mass of regulatory and legal issues addressed by the certificate-of-need statutes and regulations of particular states.

The certificate-of-need resources, the substance of the sourcebook, are listed in several bibliographies, including one of books, reports, and working papers; a second of relevant articles; and a third of law cases by case name.

Abstracted law cases, arranged by legal venue, are another resource in the sourcebook. A listing of law cases, arranged according to the nature of the underlying legal cause of action and linked with particular healthcare equipment, facilities, and services, is another resource. In addition, a listing by state will help users determine whether particular types of healthcare equipment, facilities, and services are subject to certificate-of-need regulation.

For those seeking answers to particular real-life problems related to certificate of need, the resource materials in the sourcebook may be generally instructive. However, statutes, case laws, and regulations that impinge on the certificate-of-need mechanisms of individual states may change over time, thus eroding the timeliness and potential helpfulness of the sourcebook. The fragmentation and decentralization of the U.S. healthcare system may lessen the practical value of resource materials in this book. In any case, this reference should not be used as a surrogate for the counsel of qualified professionals regarding specific problems or

issues pertaining to certificate of need. *Reviewed by Leo Uzych, JD MPH*

The Disease Manager's Handbook

Rufus Howe

Jones and Bartlett Publishers, www.jbpub.com, 2005, \$46.95, 245 pages, ISBN 0-7637-4783-1

Audience: case managers, disease managers, nurses, physicians

Key Words: care planning, case and care management, patient health information

According to Howe, "Disease management practice is the sum of incorporating patient characteristics, formulating the clinical question, crafting an optimal intervention, and delivering that intervention to the patient in a way that positively affects financial and clinical outcomes."

This handbook provides a basic road map for the disease management professional. It can be used as a graduate school textbook and by healthcare professionals seeking to diversify their careers. The discussion of how disease management may complement the case manager's role should be enlightening for case managers. Chapters 8 and 9 will be helpful for novice disease managers trying to develop an organization's program(s) in disease management.

Chapter 16 focuses on understanding and following the plan of care. The author categorizes three issues involved in providing healthcare instructions to patients:

- awareness of the differences between patients' and physicians'expectations concerning what information is given
- the amount of information given by physicians, the lack of basic knowledge on the part of patients, and patients' failure to comply with physicians' instructions
- the language and vocabulary used to instruct.

Doctors are aware that their patients are not familiar with medical terminology, but they are also under time constraints when providing instructions.

Improving communication should be the mutual goals of the physician and the patient. The disease manager can assist in reaching this goal through techniques such as creating